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Approved By Director:		Effective Date: 9/5/	/00
Revised Date: 2/26/08, 2/9/2009, 11/30/11, 7/17/12, 9/4/12, 9/24/13, 5/10/16			

Policy

- 1. The facility has clearly defined written policies, procedures and practices governing admission (5A-01), (OAC 36-12 A, B, C).
- 2. Written intake criteria prohibits discrimination in accepting referrals on the basis of gender, disability, race, religion, creed, or national origin (5A-01-01), (5A-09), (OAC 36-16 M).
- 3. Legal commitment authority is documented by court order, statute, or compact (5A-02).
- 4. The agency records information on each juvenile to be admitted that, unless prohibited by local statute, includes, at a minimum, the following (5A-03), (OAC 36-12 D, E):
 - A. Name
 - B. Address
 - C. Date of birth
 - D. Sex
 - E. Race or ethnic origin
 - F. Reason for referral
 - G. Whom to notify in case of emergency
 - H. Date information gathered
 - I. Name of referring agency or committing authority
 - J. Education/school history
 - K. Social history, where available
 - L. Special medical problems or needs
 - M. Personal physician, if applicable
 - N. Legal status, including jurisdiction, length, and conditions of placement
 - O. Signature of both interviewee and employee gathering information
 - P. Date and time of admission
 - Q. Offenses

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- R. Employment, if any
- S. Religion
- T. Driver's License number, social security and Medicaid number, if applicable
- U. Physical description
- V. Recent photograph
- W. Behavioral observation including state of consciousness and mental status, appearance, conduct, tremor, and sweating
- X. History of substance abuse (alcohol and other drugs)
- 5. Written policy, procedure and practice provide that the facility distributes copies of admission policies to referring agencies and interested parties (5A-04).
- 6. Written policy, procedure and practice provide that the facility advises the referring facility when a prospective juvenile is not accepted into the program, stating specific reasons (5A-05).
- 7. Written policy, procedure and practice provide that the facility indicated, upon written request from the prospective juvenile, the reason(s) why he/she was not accepted into the program (5A-06).
- 8. Written policy, procedure and practice provide that the facility Administrator or designee receives appropriate information in each juvenile being considered for admission to the program (5A-08).

Procedures

Distribution of Admission Policies (5A-04)

 MVJRC Administrative Assistant distributes copies of the Admission policy to consortium county courts via mail as needed. Copies of the Admission policy may also be distributed to county courts outside of the consortium. The consortium counties and corresponding bed space allocation is as follows:

County	Beds
Adams	1
Brown	2
Champaign	2
Clark	8
Fayette	2
Greene	7
Highland	2
Logan	2
Madison	2
Union	2

- 2. MVJRC Director, Intake Officer, Managers and/or Program Supervisors may also distribute copies of intake and referral forms upon request or as needed.
- 3. Admission policies and procedures as well as copies of intake and referral forms are also accessible on the website, www.mvjrc.com.

Discrimination (5A-01-01, 5A-09), (OAC 36-16 M)

- 1. MVJRC does not discriminate in accepting referrals, or otherwise, on the basis of gender, disability, race, religion, creed or national origin.
- 2. MVJRC sets annual objectives to maintain a specified percentage of the population according to gender and race (1A-05).

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The Director may report to the MVJRC Governing Board regarding the demographic description of juvenile's admitted during the previous quarter as well as reason for not accepting those juvenile deemed inappropriate for the program.

Admission Criteria (5A-01), (OAC 36-12 A, B, C)

- 1. Juveniles accepted into MVJRC must be felony level adjudicated, between ages of 12 and 18, and have exhausted all service options available within their county of residence, excluding DYS commitment.
- 2. Juveniles must have a recently tested I.Q. of at least 75, or evidence of adequate cognitive ability and literacy skills.
- 3. Juveniles may not be admitted if adjudicated of a Category One or Two Felony ORC.2151.26 (A) (1) or (2); 2903.01 Aggravated Murder: 2903.02 Murder: 2903.03 Voluntary Manslaughter: 2903.04 Involuntary Manslaughter: 2905.01 Kidnapping: 2907.02 Rape: 2907.12 Felonious Sexual Penetration: and 2909.02 Aggravated Arson.
- 4. Juveniles may not be admitted with a diagnosis of psychosis or a thought disorder. Juveniles who have been given a diagnosis of the following disorders by a psychiatrist or psychologist would not be appropriate for incarceration if symptoms were present: Schizophrenic Disorder, Paranoid Disorder, Schizophreniform Disorder, Brief Reactive Psychosis, Schizo-Affective Disorder, and Atypical Psychosis.
- 5. Juveniles may not be accepted whose parents or guardians refuse to or cannot be effectively courtordered to participate in their child's treatment, unless the juvenile's county of residence has plans to place the juvenile in an out-of-home placement following discharge from the center.
- 6. Juveniles exhibiting acute withdrawal symptoms from drugs or alcohol may not be accepted prior to detoxification.
- 7. Juveniles who are diagnosed with communicable or contagious diseases that pose serious threats to the health and well-being of others may not be admitted.
- 8. Juveniles who are residents of another state or country may not be admitted without documentation in the juvenile's case record that the party making the placement has the legal authority to make the placement. All such placements shall be made in conformity with the terms of the interstate compact on juveniles of the interstate compact on the placement of children: Section 2151.56 of the Ohio Revised Code.
- 9. MVJRC does not accept juveniles for emergency shelter.
- 10. Juveniles who are pregnant may not be admitted during late stage pregnancy when due date is to occur during placement.
- 11. Juveniles selected for program placement have gone through the admission process and have been deemed appropriate by the Treatment Team. A recent psychological evaluation is required for juveniles with a history of mental illness and/or violence or potential for violence to others. A psychological evaluation conducted within the previous six months is preferred. Treatment Team considerations in determining the appropriateness of placement at MVJRC include, but are not limited to the following:
 - A. History of mental illness: Juveniles exhibiting prominent symptoms would be inappropriate for incarceration including but not limited to prominent delusions that significantly interfere with daily functioning; auditory hallucinations specifically command hallucinations to commit harm; incoherent, marked loss of associations, markedly illogical thinking, catatonic or other grossly disorganized behavior in which the juvenile is unable to process and/or respond appropriately to input from care-givers. Recency of the history, frequency and/or intensity of mental illness as well as the level of control provided by medication therapy are given special consideration by the Treatment Team.
 - B. History of violence: Juveniles with a history of non-compliant/violent behavior in other institutional and/or residential settings would be inappropriate for placement at MVJRC

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including but not limited to: leadership and/or participation in group disturbances; highly unstable mood contributing to physical acting out including but not limited to assaultive behavior and/or property damage; significant history of life-threatening self-harm and/or self-mutilation. Recency of the history, frequency and/or intensity of violence as well as the level of control provided by medication therapy are given special consideration by the Treatment Team.

<u>Referral</u> - Referring counties shall internally screen prospective referrals to the MVJRC based upon admission criteria. The referring counties shall assign a probation officer to be responsible for the juvenile's treatment and aftercare in the event of placement. Said probation officer shall contact the MVJRC Intake Officer to initiate referral for placement.

Re-Admission – Youth may be re-admitted to the program following a previously successful permanent release. The Treatment Team may approve program modifications for re-admission including but not limited to:

- 1. Modified length of stay.
- 2. Modified Transition Release.
- 3. Modified program sanctions.
- 4. Modified Treatment Goals.

Screening (OAC 36-12 E)

- 1. MVJRC Intake Officer shall screen all referrals. In the absence of the Intake Officer, referrals shall be screened by the Program Manager.
- 2. The Intake Officer shall schedule a meeting with the designated probation officer, the juvenile and the parent(s)/guardian(s). If the child is in the custody of Children Services, the CSB Caseworker should attend. Additional persons, professional or personal, who are identified as part of the juvenile's support system may also be invited to participate in the process. The meeting shall take place at MVJRC, the site where the juvenile is being detained, or other identified location.
- 3. The meeting shall include:
 - A. Review all required documents, complete and sign relevant forms.
 - B. Interview the parent(s)/guardian(s).
 - C. Interview the juvenile.
 - D. Orient parent(s)/guardian(s) to facility and program.
 - E. Conduct assessment.
 - F. Consultation with the probation officer.

Commitment Authority (5A-02)/Admission Record (5A-03), (OAC 36-12 D, E)

- MVJRC Intake Officer shall obtain and secure the necessary information to establish a record of each
 juvenile to be placed in the facility. The MVJRC Intake Officer shall ensure the following documents are
 completed and available including the legal entry of commitment as documented by court order, statute,
 or compact:
 - A. Digital photo (taken at time of intake)
 - B. Judgment Entry
 - C. MVJRC Report of Assessment
 - D. Ohio Department of Youth Services Disposition Investigation Report and/or:
 - E. OYAS (Ohio Youth Assessment System)
 - F. Copy of Social Security Card
 - G. Copy of Insurance/Medical Card

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- H. Copy of Birth Certificate
- I. Copy of Medical Treatment/Medication Release Form
- J. Immunization Records (if available)
- K. Medical Waiver and Release of Information Form
- L. Medical Services Physical Examination Form
- M. Parent Contract of Participation
- N. Competitive Sports/Adventure Activity Program Participation Agreement
- O. Court Records (including but not limited to):
 - 1. Orders of Guardianship/Custody (if applicable)
 - 2. No Contact Orders (if applicable)
 - 3. CSB Report
- P. Prior Placement Records
- Q. Psychiatric/Psychological/Counseling Records
- R. Drug/Alcohol Assessment (if applicable)
- S. Police Reports/Victim Impact Statements
- T. Education Records (transcripts, IEP, MFE, OGT and Parent Release of Information and Enrollment Form)
- 2. MVJRC completes a preliminary health screening record by a staff person trained in health screening techniques for all new admissions. See Policy #33, 4C-09 regarding Health Care.

Information to Administrator (5A-08)

- 1. MVJRC Intake Officer shall prepare a Report of Assessment for presentation to the MVJRC Treatment Team.
- 2. MVJRC Treatment Team shall screen all eligible youth referred to the center and determine who is appropriate for placement. The Treatment Team shall consist of the following: Director, Intake Officer, Program Manager, Operations Manager, Program Supervisors, Mental Health Therapists, Teacher, Nurse and Administrative Assistant. This committee shall meet weekly to:
 - A. Screen all eligible juveniles who have been referred for admission in lieu of commitment to ODYS.
 - B. Screen all eligible juveniles referred by ODYS.

Notification of Rejection/Acceptance (5A-05)/Notification to Juvenile (5A-06)

- The Intake Officer shall notify the referring court by phone of the acceptance of non-acceptance of the
 juvenile for placement at MVJRC following the Treatment Team Meeting. If the juvenile is accepted, the
 Intake Officer shall forward a letter of acceptance following the screening. The letter may include the
 date and time of placement at MVJRC. If the juvenile is not accepted, the Intake Officer shall forward a
 letter to the referring court explaining the reasons juvenile was denied.
- 2. Upon receipt of written request from juvenile, the Intake Officer shall forward a letter to the youth explaining the reasons the juvenile was denied.
- 3. Referrals from the Ohio Department of Youth Services shall be handled pursuant to procedures described above.

Assessments:

- 1. Pre-Intake Assessment
 - A. The Intake Officer or designee shall interview prospective residents prior to admission. The Intake Officer shall conduct a guided interview pursuant to the following battery of assessments:

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- 1. Ohio Youth Assessment System (OYAS) Residential.
- 2. Massachusetts Youth Screening Instrument Second Edition (MAYSI 2).
- 3. How I Think (HIT) Pre.

Items 2 and 3 may be completed during orientation phase of placement.

- 2. This battery of assessments informs the Intake Officer's *Report of Assessment* which is presented to the MVJRC Treatment Team for review at weekly Treatment Team Meetings.
- 3. Report of Assessment informs development of *Personal Program Plan*. The Personal Program Plan is reviewed by the Treatment Team during Treatment Team Meeting.
- 4. The Personal Program Plan informs development of Treatment Goals within first 21 days of a resident's date of intake. Personal Program Plan serves as the foundation for resident and Mental Health Therapist to establish goals and objectives as part of a comprehensive Treatment Plan.

Post-Intake Assessment

1. Mental Health Therapists administer the following battery of assessments:

AOD assessments are triggered by pre-intake OYAS assessment.		
1. Substance Abuse Subtle Screening Inventory – Adolescent Second		
Edition Pre (SASSI – A2 Pre).		
2. Texas Christian University Drug Screen 2 (TCU-DS2).		
3. Texas Christian University Motivation Form (TCU-Motform).		
JSO assessments are triggered by committing offense.		
1. Juvenile Sex Offender Assessment Protocol – II Pre (J-SOAP-Pre).		
2. Millon Adolescent Clinical Inventory (MACI).		
Mental health assessments include:		
1. MAYSI-2.		
2. MACI.		
Academic assessments are administered by the educator.		
1. MAPS pre.		

Pre-Release Assessment

- 1. The following assessments are administered within one month of anticipated permanent release:
 - A. Ohio Youth Assessment System (OYAS) Re-entry (Mental Health Therapist).
 - B. How I Think (HIT) post (Intake Officer).
- 2. These assessments serve as a benchmark to proceed with permanent release and inform the Final Progress Report as an indicator of readiness to return to the community.
- 3. Mental Health Therapists administer the following assessments within one month of anticipated permanent release:

AOD	1. SASSI - Post
JSO	1. JSOAP - Post

- 4. These assessments serve as a benchmark to proceed with permanent release and inform the Final Progress Report as an indicator of readiness to return to the community.
- 5. Academic assessment administered by educator.

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A. MAPS – post.

In Summary:

Assessment	Administrator	Purpose	Time of Delivery
OYAS-Residential	Intake Officer	Level of Risk	Pre-Intake
MAYSI-2	Intake Officer	Mental Health	Pre-Intake/Orientation
HIT-Pre	Intake Officer	Attitudes/values/beliefs	Pre-Intake/Orientation
OYAS-Re-Entry	Mental Health Therapist	Level of Risk	Pre-Release
HIT-Post	Intake Officer	Attitudes/values/beliefs	Pre-Release
SASSI-A2-Pre	Mental Health Therapist	Substance Abuse	Post-Intake
SASSI-A2-Post	Mental Health Therapist	Substance Abuse	Pre-Release
TCU DS 2	Mental Health Therapist	Substance Abuse	Post-Intake
TCU Motform	Mental Health Therapist	Substance Abuse	Post-Intake
JSOAP- Pre	Mental Health Therapist	Sexual Offending	Post-Intake
JSOAP – Post	Mental Health Therapist	Sexual Offending	Pre-Release
MACI	Mental Health	Sexual Offending/	Post-Intake
	Therapist/Clinical	Mental Health	
	Supervisor		
MAPS –Pre	Educator	Academics	Post-Intake
MAPS – Post	Educator	Academics	Pre-Release

Applicability

This policy applies to Intake Officer, Mental Health Therapist, Xenia Community Schools Teachers, Program Manager, Director.

Definitions

None